


CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No.
Applicant(s): WARREN B. NICHOLSON			DE3-0057/H201288
Application No. 10/008,304	Filing Date 11/06/2001	Examiner ALANDRA ELLINGTON	Group Art Unit 2855
Invention: A METHOD AND APPARATUS FOR CORRECTING FOR ATTENUATION IN AN OPTICAL TORQUE SENSOR			
<div style="text-align: right;">RECEIVED CENTRAL FAX CENTER JAN 28 2005</div> <p>I hereby certify that this <u>AMENDMENT TRANSMITTAL (1) PAGE AND AMENDMENT (11) PAGES</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(703) 872-9306</u>) on <u>JANUARY 28, 2005</u> (Date)</p> <div style="text-align: center;"><p>NOELLE T. ERICKSON (Typed or Printed Name of Person Signing Certificate)</p><p><i>Noelle T. Erickson</i> (Signature)</p></div> <p>Note: Each paper must have its own certificate of mailing.</p>			

P18/REV02

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. DE3-0057/H201288	
Applicant(s): WARREN B. NICHOLSON					
Application No. 10/008,304	Filing Date 11/6/2001	Examiner ALANDRA ELLINGTON	Customer No. 23413	Group Art Unit 2855	Confirmation No. 3299
Invention: A METHOD AND APPARATUS FOR CORRECTING FOR ATTENUATION IN AN OPTICAL TORQUE SENSOR					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	34 -	34 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____					
<input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 06-1130					
<input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.					
<input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 _____ Signature			Dated: JANUARY 28, 2005		
Troy J. LaMontagne Registration No. 47,239 Cantor Colburn LLP 55 Griffin Road South Bloomfield, CT 06002 Telephone (860) 286-2929 Customer No. 23413			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence		
CC:					

P11LARGE/REV09

RECEIVED
CENTRAL FAX CENTER
JAN 28 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: WARREN B. NICHOLSON)
Serial No.: 10/008,304) Group Art Unit: 2855
Filed: November 6, 2001) Examiner: A. Ellington
For: A METHOD AND APPARATUS FOR) Confirmation No. 3299
CORRECTING FOR ATTENUATION IN AN)
OPTICAL TORQUE SENSOR)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT – RESPONSE TO FINAL OFFICE ACTION

In response to the Final Office Action mailed December 2, 2004, reconsideration of the rejections and allowance of all claims is respectfully requested in view of the following amendments and remarks.

H-201288
DE3-0057